

Book Reviews

STRESS, STRAIN, AND VIETNAM. By N Camp, RH Stretch, and B Marshall. Westpoint, CN: Greenwood Press, 1988. ix + 315 pp. \$50.00

Reviewed by Kirby V. C. Turner, MD

The book is an annotated bibliography of psychiatric/social science literature about the effects of the Vietnam War (1965–1973) on the American soldier. The objective was to collect and collate observations, opinions, and research findings of psychiatrists, social scientists, and other mental health professionals on the effects of the Vietnam War on American combat troops. The sources were mostly psychiatric, social, and behavioral science publications, enhanced with personal narratives of those who had “in country” experiences.

The book is broken into three sections (Vietnam Service, Veteran Adaptation, and Social/Institutional context) with chapters arranged from general to specific (e.g., Combat Theater Stress to specific Soldier Narratives). Each publication has its findings succinctly summarized, so that a quick review may be performed prior to article selection. This book would make a good addition to the forensic psychiatrist's reference library—especially one currently dealing with the effects of war on personal psychology.

THE MENTALLY ILL IN JAIL;
PLANNING FOR ESSENTIAL SERV-

ICES. By HJ Steadman, DW McCarty, and JP Morrissey. New York: Guilford, 1989, xiv + 234 pp + index. \$30.00.

Reviewed by Gregory B. Leong, MD

Psychologist Henry Steadman and colleagues Dennis McCarty and Joseph Morrissey have published the findings of their NIMH supported study of jail programs for mentally ill inmates. They surveyed 43 large- and medium-sized jails to develop an information base about current jail mental health services. The jails studied reflect diversity of funding, size, approach to the mentally ill inmate, relationship of the jail to external mental health services, and existence of a current court order or consent decree. The last operationally affects the availability, type, and effectiveness of jail mental health services. The authors formulated five program planning principles. The fifth principle, “there is no one best way to organize a jail mental health program,” epitomizes their findings and underscores the challenge in the planning of jail mental health services.

The authors wrote eight of the 11 chapters, including one devoted to describing their New York State local forensic suicide prevention/crisis intervention program. Two invited contributors offered program descriptions for Palm Beach County, Florida, and Boulder County, Colorado, programs.

The author's first planning principle,

"The mentally disturbed jail inmate must be viewed as a community issue," aptly points out that the problem posed by these individuals extends beyond the confines of the jail. With this in mind, all psychiatrists need to be aware of this problem. Nevertheless, this book would seem to have the most applicability for those mental health professionals involved in program planning, evaluation, or treatment of the mentally ill in jail as well as those with interest in this area.

SEX IN THE THERAPY HOUR: A CASE OF PROFESSIONAL INCEST. By CM Bates and AM Brodsky. New York: Guilford Press, 1989. xx + 236 pp. \$19.95.

Reviewed by Jess Amchin, MD

This book is an interesting and disturbing examination of one case in which sex occurred during therapy sessions between a psychologist ("Dr. X") and his patient Carolyn Bates, one of the book's authors. The book is divided into two parts. Part One is a detailed personal narrative by the patient (now a psychology trainee), covering her personal background and circumstances leading to therapy, the therapy process, and the sexual exploitation and its aftermath: termination of treatment, license revocation hearings against Dr. X, civil litigation, and psychological recovery. Part Two is an analysis written by Dr. Brod-

sky, an expert witness in the case, reviewing some of the prominent literature and its application to this case. It summarizes her clinical assessment of the patient, including the psychological impact of both the sexual events and the subsequent legal proceedings.

Bates' personal narrative is sensitive, articulate, and fair; she succeeds in the difficult task of communicating not only facts, but also their underlying psychodynamics and emotional impact. The narrative captures the reader's interest, although it contains occasional gaps, such as insufficient or dry explanations of legal or licensing procedures.

Part Two complements the personal narrative in Part One, although it was somewhat repetitive when restating clinical material presented in the preceding narrative and occasionally lapsed into discussions that would be seen as superficial or overly technical by certain readers.

Ms. Bates deserves special credit for her courage in enduring exposure and pursuing her legal actions, and in writing this book so that others would gain a clearer understanding of the detrimental impact of sexual exploitation and the need to enforce its proscription.

This book represents a valuable step towards rectifying a prominent professional problem. I highly recommend it.

BODIES UNDER SIEGE: SELF-MUTILATION IN CULTURE AND PSYCHIATRY. By AR Favazza. Baltimore,

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Johns Hopkins Press, 1987. 260 pp + index. Price not given.

Reviewed by Melvin G. Goldzband,
MD

Dr. Favazza has written a work of outstanding, even provocative interest to those of us who deal with people who act out and get into trouble. The detailed dynamics of self-mutilation elaborated in this book will provide remarkable understanding of the needs and characteristic behavior of prison populations, especially; however, the text transcends that limited (albeit enlarging) group.

The author organized his book in a very clear manner which invites the reader to probe further into the sometimes grisly material he presents. Dr. Favazza not only discusses psychodynamics and treatment approaches for those individuals with self-destructive—or sometimes pseudo self-destructive—mutilating acts; he also provides erudite, well-researched and validated historical and socioanthropologic backgrounds for each of the actions presented. Tattooing is the most common of the self-mutilations discussed, but this is presented as only one manifestation of actions against the integument. Favazza also describes human pincushions and skin cutters. The section on animal automutilation is a fascinating revelation and a source of very provocative hypothesizing about instinct and biology.

We are asked to explain people; that is the essence of the definition of *forensic* psychiatry. This book certainly helps us do that. It should be a standard reference.

MENTAL DISABILITY LAW: CIVIL AND CRIMINAL. By ML Perlin, Esq. Charlottesville, VA: Mitchie Co., 1989. 2199 pp. in three volumes, \$240.

Reviewed by Robert M. Wettstein, MD

Now this is a publication worth celebrating! Professor Perlin has prepared what is undoubtedly the most complete account of mental health law by a single author in the history of the field. The three volumes contain 18 chapters. The first volume, the smallest of the set, is essentially devoted to civil commitment. The second, at 1,000 pages the largest, reviews patient rights generally, as well as patient rights to receive and refuse treatment. The third volume covers psychiatric tort actions, criminal incompetency, civil and criminal responsibility of the mentally ill, death penalty, and the right to die.

The amount of information here is truly astounding. There are some 10,000 references, and the table of cases alone occupies 100 pages. The material is written in a legalistic yet readable style. The author's extensive experience as a patient's rights advocate surfaces in his uneven selection of the subject areas, but also in his analysis of the material.

Yet, despite its size, one at times wishes for more. There is no coverage of a variety of civil competency issues, family law, the law of confidentiality, or that of emotional injury. State case law is unevenly sampled, often not at all. The author's "Comments," boxed off within the text, are at times disappointingly superficial.

Nevertheless, these volumes deserve a wide audience of attorneys, mental health professionals, and patients. Every medical school, law school, and psychiatry department library should have a copy. Those who are serious about mental health law should also consider acquiring one, despite the hefty price.

INTERNATIONAL MEDICAL MALPRACTICE LAW. By D. Giesen. Tubingen, West Germany: J.C.B. Mohr (Distributed by Norwell, MA: Kluwer Academic Publishers), 1988. LVI + 923 pp. \$225.

Reviewed by Robert M. Wettstein, MD

This volume is likely to be the definitive work on medical malpractice from an international perspective. It is the revised and all-English edition of the author's 1981 monograph on the same subject, and more than double its size. It covers medical malpractice in England, Scotland, Eire, New Zealand, Australia, Canada, U.S.A., South Africa, Zimbabwe, France, Belgium, Germany, Switzerland, and Austria.

In addition to the usual sections on legal standards of care and their breach, there is extensive coverage of a variety of other areas including informed consent liability ("Disclosure Malpractice"), treatment refusal, research liability, reproductive technologies, and conflicts between law and medical ethics. The appendices include various patient bills

of rights, codes of medical ethics, and professional regulations for physicians. It is impressively documented with international medical and legal literature, though the American reader familiar with this area will note many important omissions. The volume is written from a legal rather than a clinical/risk management, epidemiological, economic, or insurance viewpoint.

This is a serious and sophisticated work for academics rather than practitioners in law, medicine, or psychiatry. The author's writing style, and his constantly changing discussion of the law of the different jurisdictions, make for difficult reading. At this price, it is not for everyone's shelf, but there should be an available copy in every reputable law and medicine library.

EMERGENCY MEDICINE MALPRACTICE. By SM Lewis, Esq. New York: Wiley Law Publications, 1987 with annual supplements. xix + 603 pp. \$95.

Reviewed by Robert M. Wettstein, MD

This book will be useful for the malpractice attorney but not the practicing physician or health care professional. In the preface the author states that the book does not focus on suits against emergency department physicians, but rather is a "basic medical and legal reference tool the lawyer whose client either has a potential medical negligence claim aris-

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ing from emergency care or is a real or potential defendant in such a suit.”

The initial chapters cover emergency medical care, general principles of legal liability in emergency medicine, defense of emergency medicine malpractice cases, and the trial of a malpractice case. Later chapters are divided into the medical and legal aspects of a variety of medical emergencies: cardiac and vascular, respiratory and thoracic, gastrointestinal, head and spinal injuries, pediatric, obstetrical and gynecological, musculoskeletal, wounds, and genitourinary. Thus, much of the volume is basic medicine and surgery, substantially adopted from emergency medical texts. Regrettably, there is no significant coverage of psychiatric emergencies. The author uses case law to illustrate the legal aspects of emergency care. The frequent figures and tables make the material especially readable.

The appendices occupy one-third of the volume, and provide sample hospital policies and medical records, JCAH guidelines for emergency services, plaintiffs' interrogatories, and cross-examination testimony of defendant emergency physicians.

PHARMACY LAW. By DB Brushwood. Colorado Springs, CO: Shephard's/McGraw Hill, 1986. xxii + 436 pp. with annual pocket supplement, \$95.

Reviewed by Robert M. Wettstein, MD

This book provides a complete account

of the legal issues presented to the pharmacist, as well as a more general account of the legal aspects of medication. Its five parts include “The Practice of Pharmacy,” “Drug Control Law,” “Pharmacist Professional Liability,” “Medication Errors and Adverse Reactions,” and “Using Scientific Principles in Drug-Related Litigation.” A reference-oriented appendix, occupying a third of the volume, provides a variety of tables, standards of pharmacy practice, codes of ethics, bibliography, cases, and legal forms. The author is a professor of pharmacy and an attorney, and has published widely in this area.

Its reference orientation, annual pocket part, and the price suggest it was prepared for a general legal audience, but not medication litigators. It is, however, a readable volume, even for the nonattorney, and the legally sophisticated clinician can learn much from it. The work can be faulted for some unnecessary duplication of material and cases in different sections throughout the volume. Its holding to a physician-centered model of informed consent, in contrast to the patient-centered model, is objectionable as well.

THE TRIAL OF JOHN W. HINCKLEY, JR.: A CASE STUDY IN THE INSANITY DEFENSE. By PW Low, JC Jeffries, Jr., and RJM Bonnie. New York; The Foundation Press, 1986. ISBN O-88277-333-X. 137 pp. Price not given.

Reviewed by William H. Reid, MD

This short book, originally published in 1986 and reprinted in 1988, uses the Hinckley trial as a foundation to discuss the insanity defense. It provides a thoughtful and scholarly discussion of the concept and history of the insanity defense, of reforms following the Hinckley trial, and of both scholarly and public reactions to *Hinckley*. The bulk of the text is narrative drawn from the expert testimony of Drs. William Carpenter and Park Elliott Dietz, and the closing arguments by government attorney Adelman and defense attorney Fuller. It makes very interesting reading.

CHILD SEXUAL ABUSE: A HANDBOOK FOR HEALTH CARE AND LEGAL PROFESSIONALS. By D Schetky and A Green (with chapters by M Finkel, J Becker, and M Kaplan). New York: Brunner/Mazel, 1988. 235 pp + index. \$27.50.

Reviewed by Elizabeth M. Adams, MD

This excellent book presents clearly what is currently known about child sexual abuse. The authors discuss in detail the developmental and psychodynamic issues involved and review the literature. A section on psychiatric and medical evaluation outlines what to do and what not to do in assessing the victim. A nice discussion of true and false allegations of sexual abuse is included. There also a

chapter on the assessment and treatment of the male offender and on the treatment of the sexually abused child.

A section on legal issues includes a chapter on court testimony by children and one on the expert as a witness. The latter would be particularly helpful for someone facing a court appearance for the first time.

I highly recommend this book to all who ever have to confront clinical and legal situations involving the sexual abuse of children. It is a most valuable resource for child psychiatrists, pediatricians, other physicians, other mental health professionals, and attorneys who work with these children and their families.

CORRECTIONAL PSYCHIATRY. Edited by R Rosner and RB Harmon. New York: Plenum Press, 1989. xv + 271 pp + appendix + index. \$49.50.

Reviewed by Gregory B. Leong, MD

Forensic psychiatrist Richard Rosner and colleague Ronnie B. Harmon have edited *Correctional Psychiatry*, the sixth volume in the Critical Issues in American Psychiatry and Law series. Many of the chapters are products, or revisions of products, that began in work by the psychiatry and general sections of the American Academy of Forensic Sciences.

Psychiatrists and other mental health clinicians are in correctional facilities as

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a result of the government's obligation to care for those whose deprivation of liberty prevents them from caring for themselves. Thus, the traditional therapeutic role of clinician may conflict with the customary deterrent, incapacitative, retributive, and reformatory functions of correctional facilities. To this end, the editors have assembled material dealing with many of the clinical, ethical, legal, and societal issues involving psychiatry and correctional institutions.

Several of the book's chapters are authored by well-known forensic psychiatrists. Six of the book's 16 chapters that comprise the "Practical Problems" section may be of particular interest to forensic clinicians. Topics covered in this section include antisocial personality, suicide, AIDS, competency to be executed, and stress in the clinician. *Correctional Psychiatry* would be of interest to most AAPL members, especially those who are intimately involved with criminal forensic psychiatry.

JUVENILE HOMICIDE. Edited by E Benedek and D Cornell. Washington, DC: American Psychiatric Press, 1989. 247 pp. \$24.95.

Reviewed by Donald R. Seidel, MD

This is the first of the "Clinic Practice Series" which has grown out of monographs entitled "Clinical Insights."

The first four chapters deal with clinical issues and are mainly oriented to-

ward a recent long-term study done at the Center for Forensic Psychiatry in Ann Arbor, Michigan. Chapter One contains an excellent review of the literature on juvenile homicide and various etiological theories. The authors then look at youths involved in homicide by dividing them into three groups: youths who are psychotic at the time of the homicide, youths who commit homicide in association with another crime such as rape or robbery, and youths who commit homicide in association with an interpersonal conflict with the victim.

An estimated one-third of adolescents accused of homicide in Michigan during the eight-year period of the study were referred to the Forensic Center. This gave an N of 88 for one of the largest studies done to date. By viewing the adolescents via the three aforementioned categories, some interesting factors were noted and areas for future study were indicated. A chapter entitled "The Adolescent Witness to Homicide" is of special interest to anyone working with such persons.

The last five chapters have to do with forensic, dispositional, and treatment issues, with some very clear recommendations for handling such cases. Chapter 8 had some especially interesting and thought-provoking comparisons between the juvenile justice system and the adult criminal system.

SOCIAL ORDER/MENTAL DISORDER: ANGLO-AMERICAN PSYCHIATRY IN HISTORICAL PER-

SPECTIVE. By A Scull, Berkeley: University of California Press, 1989. xi + 360 pp.

Reviewed by Ronald F. White, PhD

Social Order/Mental Disorder is a collection of thirteen essays previously published by Scull between 1975 and 1987: all but one first appeared before 1985, many in journals outside of the discipline of history. As one might expect from such anthologies, there is virtually no continuity between the chapters, nor have the essays been revised or updated in light of the excellent research conducted in the last five years by American and British scholars (e.g., Ann Digby, Ellen Dwyer, Roy Porter, and Nancy Tomes).

Conventional historians will find fault with Scull's eccentric use of historical documentation, heavy reliance on secondary sources, and excessive use of long quotes. It is also rather surprising that although the author is by occupation a sociologist, presumably familiar with quantitative methodology, very little statistical evidence is presented in support of his views.

TREATING CHILD SEX OFFENDERS AND VICTIMS, A PRACTICAL GUIDE. By AC Salter: Sage Publications, 343 pp. Price not available.

Reviewed by Judith Salle' Yongue, MD

An effective program demands a statement of its philosophy, a mission, and a goal. The philosophy recommended by this manual is that child molestation is the result of deviant arousal pattern and/or the inappropriate conversion of nonsexual problems into sexual behavior. The goals of therapy for offenders are to learn to control their deviant arousal patterns, to place obstacles in the path of converting nonsexual problems into sexual behavior, and to learn to solve nonsexual problems in nonsexual ways. Only those offenders who acknowledge responsibility for child sexual abuse are treatable. All reports relating to the sexual abuse, including the victim's statement to the police, the offender's statement to the police, presentencing investigation, and probation and parole reports must be available to the treatment team. Offender assessment is crucial, but the usual psychological tests are totally inadequate and are of no help in the treatment. Insight-oriented therapies have not been effective in treating the sex offenders. The addiction model is more valuable, although the addictive disorders differ from child sexual abuse in that latter is an assaultive behavior that harms children.

The therapy for the sex offender is primarily one of relapse prevention. The Vermont sex offender program is the basis for the author's research and clinical experience. The policy of this program is to accept only those offenders who are willing to accept responsibility for their behavior. This is strictly monitored, and a very broad range of diagnostic and therapeutic efforts are used

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which seek to address the antecedents as well as the internal and external factors which promote illegal sexual activity. A very highly structured process is used to individualize the therapy and promote the offender's responsibility for the behavior.

Very little is said concerning the long-term effects of sexual abuse on the child. The chapters on the spouse are also limited but tend to indicate that there is no specific constellation of personality characteristics. Blaming the family or the victim is to be actively discouraged.